# PERSONAL FINANCIAL QUESTIONNAIRE

(To Be Filed in Duplicate)

Na	me Date
Add	dress
Sul	omitted in connection with application for gaming license for:
	Name of Gaming Establishment
1.	Do you anticipate active participation in the management and operation of the gambling establishment?  Yes  No  If yes, attach detailed description of activity anticipated.
2.	Amount to be invested in the business \$
	Percentage of ownership this will represent
3.	Investment will be derived from the following sources: (Submit executed agreements for all financial transactions.)
4.	Has your interest in this gambling establishment been assigned, pledged, or hypothecated to any person, firm or corporation, or has any agreement been entered into whereby your interest is to be assigned, pledged, o sold either in part or in whole?  Yes \[ \subseteq \text{No } \subseteq \]
5.	Have you ever filed bankruptcy? Yes $\square$ No $\square$ If yes, furnish details on separate sheet.
6.	Have any individual, city, county, state, or Federal liens been filed against you as an individual, sole proprietor member of a partnership, owner of a corporation, or similar capacity? Yes No If yes, provide details on separate sheet.
7.	Has your Federal Income Tax Return ever been audited or adjusted? Yes No If yes, provide details on separate sheet.
8.	Last Federal Income Tax Return was filed for year at
	City State

Applicants are advised that Federal Income Tax Returns will be required during the licensing investigation.

9.	Do you own or control any assets or liabilities located outside the United States? Yes No If yes, provide details on appropriate schedule or on a separate sheet.
10.	Do you hold any assets in a Trust? Yes No No If yes, attach a copy of all such trusts, and include a schedule of assets held by each trust.
11.	Do you control, manage, or hold in trust any assets or liabilities for another person or entity? Yes No Provide details under remarks on page 5.
12.	Annual Income \$
	Salary\$
	Interest\$
	Dividends\$
	Other (Describe)
	Other (Describe)
	Other (Describe) \$

13. List all assets and liabilities on the attached schedules. Please indicate all assets and liabilities held as sole and separate property by yourself and your spouse. (Attach additional schedules or forms if necessary.)

## **STATEMENT OF ASSETS**

as of	
	Date

List all assets, both tangible and intangible, on the appropriate line below. Enter the amount as of the date of this statement. Each listed asset must be described fully on the appropriate schedule.

ASSETS:	Original Cost/ Investment	Market Value
Cash on Hand\$	<u>;                                    </u>	\$
Cash in Financial Institutions (Schedule "A")		
Accounts and Notes Receivable (Schedule "B")		
Marketable Securities (Schedule "C")		
Business Investments (Schedule "D")		
Fixed Assets (Schedule "E")		
OTHER ASSETS:		
(Schedule "F")		
TOTAL ASSETS\$	;	\$

# **STATEMENT OF LIABILITIES**

as of \_\_\_\_\_

List all liabilities on the appropriate line below. Enter the amount as of the liability must be described fully on the appropriate schedule.	e date of this state	ement. Each listed
LIABILITIES:	Original Amount	Present Balance
Accounts Payable (credit cards, etc.)	\$	\$
Taxes Payable		
Notes Payable (Schedule "G")		
Mortgages Payable (Schedule "H")		
Other Liabilities (Schedule "I")		
TOTAL LIABILITIES	\$	\$
NET WORTH		\$

CONTINGENT LIABILITIES (Schedule "J")......\$

STATE OF	
	∠ ss.
COUNTY OF	J
I.	, being duly sworn, depose and say that the above
statements are true and correct to the best of my knowledge that misrepresentation or failure to re refusal to issue a gaming license by a municipa aware that later discovery of an omission or mis the revocation of a gaming license. Further, th knowledge that the Gaming Control Act (NRS matter before either the board or commission is	knowledge and belief and that this statement is executed with the veal information requested may be deemed sufficient cause for the dity, or by a county or by the State of Nevada. Further, that I am representation made in the above statements may be grounds for at I am voluntarily submitting this application under oath with full 463.140(5)) provides that "Any person making false oath in any guilty of perjury." I am voluntarily submitting this application under d to submit this application to appropriate municipal and county
	APPLICANTSignature
SUBSCRIBED AND SWORN TO BEFORE ME	Signature
THIS,,,	
Notary Public	
	<u>REMARKS</u>
-	

## **SCHEDULE "A"**

## **Cash in Financial Institutions**

List below all accounts, foreign or domestic, maintained by you, your spouse, or dependent children.

Name and Address of Financial Institution	Names of Persons Appearing on Account	Account No.	Date Opened	Interest Rate	Type of Account	Balance as of (Date)

## **SCHEDULE "B"**

## **Accounts and Notes Receivable**

List below all accounts and notes receivable held by you, your spouse, or dependent children. Indicate by means of an asterisk (\*) in the first column accounts and notes receivable held by your spouse and/or dependent children.

Name and Address of Debtor	Date Incurred	Original Amount	Unpaid Balance	Payment/ Period	Interest Rate	Maturity Date	Purpose	Collateral

#### **SCHEDULE "C"**

#### **Marketable Securities**

List below the information requested for all marketable securities held or controlled by you, your souse, or dependent children. Whenever interest exists through a mutual fund or holding company, the stocks held by such mutual fund or holding company need not be listed; whenever such interest exists through a beneficial interest in a trust, the stocks and bonds held in such trust shall be listed if you, your spouse, or dependent children have knowledge of what stocks and bonds are so held. **INDICATE PUBLICLY TRADED STOCKS AND BONDS BY AN ASTERISK (\*).** Indicate by means of a double asterisk (\*\*) next to the first column all stocks and bonds held by your spouse or dependent children.

Issuer	Туре	No. of Shares or Units	Purchase Price	Date of Purchase	Name in Which Held	Market Value

#### **SCHEDULE "D"**

#### **Business Investments**

List below the information requested regarding any business investments in which any direct, indirect, vested, or contingent interest is held by you, your spouse, or dependent children, along with the names of all individuals or entities who share a direct, indirect, vested, or contingent interest therein. This should include but not be limited to joint ventures, partnerships, sole proprietorships, corporations, and LLCs.

Entity Name	Type of Entity	No. of Shares or Units	Percent of Ownership	Purchase Price	Date of Purchase	Name in Which Held	Individuals or Entities Sharing Interest and Percentage Ownership	Market Value
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#### **SCHEDULE "E"**

## **Fixed Assets**

List below the information requested regarding any real property in which any direct, indirect, vested, or contingent interest is held by you, your spouse, or dependent children, along with the name of all individuals or entities who share a direct, indirect, vested, or contingent interest therein.

Address/Location	Туре	Size	Purchase Price/ Improvements at Cost	Date of Purchase	Down Payment	Source of Down Payment	Ownership Percent	Other Owners	Income	Market Value

#### SCHEDULE "F"

#### **Other Assets**

List below the information requested for all other assets held by you, your spouse, or dependent children. Indicate by means of an asterisk (\*) in the first column those assets held by your spouse or dependent children. (i.e., automobiles, personal property, cash surrender value of life insurance policies, pension plans, etc.)

Type of Asset	Purchase Price	Date of Purchase	Market Value	Other Information

## **SCHEDULE "G"**

## **Notes Payable**

List below the information requested for all notes payable for which you, your spouse, or dependent children are obligated. Indicate by means of an asterisk (\*) in the first column those notes for which your spouse or dependent children are obligated.

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment/ Period	Interest Rate	Maturity Date	Purpose	Collateral

#### **SCHEDULE "H"**

## **Mortgages Payable**

List below the information requested for all mortgages or liens payable on real estate for which you, your spouse, or dependent children are obligated. Indicate by an asterisk (\*) in the first column those mortgages/liens for which your spouse or dependent children are obligated.

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment/ Period	Interest Rate	Maturity Date	Position of Mortgage or Lien	Description/Address of Real Estate

## **SCHEDULE "I"**

## Other Liabilities

List below the information requested for any other indebtedness for which you and/or your spouse or dependent children are obligated. Indicate by means of an asterisk (\*) in the first column any indebtedness for which your spouse or dependent children are obligated. INCLUDE CHILD SUPPORT AND ALIMONY OBLIGATIONS.

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment/ Period	Interest Rate	Maturity Date	Purpose	Description of Liability	Collateral

## **SCHEDULE "J"**

# **Contingent Liabilities**

List below the information requested for all contingent liabilities for which you and/or your spouse are obligated. Indicate by means of an asterisk (\*) in the first column those contingent liabilities for which your spouse is obligated.

Name and Address of Creditor	Date Incurred	Original Amount	Unpaid Balance	Payment/ Period	Interest Rate	Maturity Date	Purpose	Collateral	Persons Liable Besides You and/or Your Spouse